DOCUMENT RESUME

ED 404 017 PS 025 009

TITLE	The Case for Kids. Community Strategies for Children and Families: Promoting Positive Outcomes.
INSTITUTION	Carter Center, Atlanta, GA.; Center for the Study of Social Policy, Washington, DC.; Florida State Mental Health Inst., Tampa.
PUB DATE	Feb 96
NOTE	33p.; Articles in this publication are excerpted and adapted from presentations and discussions at the Symposium, "Community Strategies for Children and Families: Promoting Positive Outcomes" (Atlanta, GA, February 14-16, 1996).
AVAILABLE FROM	Carter Center Mental Health Program, One Copenhill, Atlanta, GA 30307 (free).
PUB TYPE	Collected Works - Conference Proceedings (021) -- Reports - General (140) -- Information Analyses (070)
EDRS PRICE	MF01/PC02 Plus Postage.
DESCRIPTORS	Agency Cooperation; At Risk Persons; *Child Advocacy; Child Development; *Child Welfare; *Community Action; Community Involvement; Early Parenthood; Economically Disadvantaged; Family Needs; Family Problems; *Family Programs; Government Role; Leadership; Minority Groups; One Parent Family; Poverty; Public Policy; *Social Services
IDENTIFIERS	Family Advocacy; *Family Support; Resilience (Personality); Social Movements; Strategy Choice

ABSTRACT

Why, despite society's common understanding of the problems of children, have individuals failed to act decisively and powerfully to bring them security and hope? This report, which includes articles excerpted and adapted from presentations and discussions at a 1996 symposium, addresses this question. After an introduction by Rosalynn Carter, the first article (Charles Bruner) presents the symposium's vision for children, families, and neighborhoods that requires new forms of family supportive front-line practice; reconstructing public systems to embrace new principles; building social capital through collective action; and creating economic opportunity and hope. The second article (John Gates) suggests that "resiliency"--as a concept and goal--may be the easy-to-understand rubric needed to bring programs for children and families to scale. The third article (Frank Farrow) makes the case for neighborhood networks of family support, based on the premise that conditions will not improve for many families unless they receive the help they need closer to home. The fourth article (Bob Friedman) notes the need for "leadership teams," people who can transcend an individual vision and work together over the long term to create and sustain meaningful change. The report concludes with a summary of group discussion at the symposium, particularly the need for cultural sensitivity, and of "next steps" in implementing the symposium's vision. Contains a list of symposium participants and sponsors. (EV)

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COMMUNITY STRATEGIES FOR CHILDREN AND FAMILIES:
PROMOTING POSITIVE OUTCOMES

The Carter Center
Atlanta, Georgia
February 14–16, 1996

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A Movement for Children

By Rosalynn Carter

CHAIR, THE CARTER CENTER MENTAL HEALTH TASK FORCE

Why, despite our common understanding of the problems of children, have we failed to act decisively and powerfully to bring them security and hope? It is not as if there is heated disagreement over the issue. Few on either side of the political or ideological spectrum would argue that they—and our families—are not at risk. Few would disagree that there is a general breakdown in family structures; that poverty, abuse, neglect, violence, fear, hate, anger, and a hundred other problems threaten our children, our families, and clearly, the future of our country.

So why is there such apathy around protecting our children from the moral, mental and physical destructions that are so obvious? Why isn't there more of a national recognition of the needs of children? Why isn't there more of an outcry to provide for them a greater sense of security, health, and hope?

A year ago, Bob Friedman of the Department of Child and Family Studies at the University of South Florida, talked with John Gates, Director of the Mental Health Program of The Carter Center, about the idea that The Carter Center might want to host a conference with the University of South Florida's Florida Mental Health Institute on the subject. Both felt such a conference might foster are a evaluation of our society's priorities.

In 1994, at the annual Rosalynn Carter Symposium on Mental Health Policy, we had focused on children and families at risk. There was a broadbased consensus among participants that, in its failure to act for our children's future, our country was depleting its clearest vision, its most important resource, its most fragile and most promising hope for tomorrow.

While the Symposium was successful in identifying ways in which to foster programs of promise for children in our communities, we realized that a continuing dialogue would be necessary. The participants left with the plea that The Carter Center stay involved.

So when Bob approached John regarding a meeting to again focus on children and families at risk, it seemed a good opportunity to continue the work we had begun. The Center for the Study of Social Policy joined the University of South Florida's Florida Mental Health Institute and The Carter Center Mental Health Program as a co-sponsor.

Our planning for the conference was a collaborative effort. The meetings and lengthy dialogue finally crystallized into a simple objective: "Our overall goal," we said, "is to begin developing a strategy for a national movement committed to improving the lives of children."

Changes are under way in mental health and child welfare, income supports, health care, education, employment and training. Government is being redesigned. Yet, in our national belt-tightening, no one seems to be addressing the outcomes we would like to see for children and families.

Perhaps it is that we do not have a clear focus, perhaps we lack a coordinated strategy, or perhaps there is a lack of the political will to pursue the issue. There is consensus in the country that we want "the best" for children and families, but we have no consensus as to what that means.

We need a clear vision to draw from our collective understanding the ideas and strategies that would help create a national movement for children. In these proceedings we believe you will see that our conference has made a contribution to that vision and we hope, to its implementation.

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Few on either side of the political or ideological spectrum would argue that children and families are not at risk. Few would disagree that poverty, abuse, neglect, violence, fear, hate, anger, and a hundred other problems threaten our children, our families—and clearly, the future of our country. So why is there such apathy around protecting our children?

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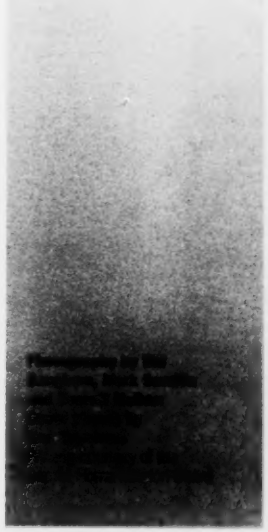
Produced by

- The Carter Center Mental Health Program
- The Florida Mental Health Institute
- The Center for the Study of Social Policy



The articles in this publication are excerpted and adapted from presentations and discussions at the Symposium ***Community Strategies for Children and Families: Promoting Positive Outcomes*** *at the Carter Center in Atlanta, Georgia, February 14–16, 1996.*

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Developing the Strategy

By Frank Farrow, CENTER FOR THE STUDY OF SOCIAL POLICY
Bob Friedman, THE UNIVERSITY OF SOUTH FLORIDA: FLORIDA MENTAL HEALTH INSTITUTE
John Gates, THE CARTER CENTER MENTAL HEALTH PROGRAM

A Symposium, entitled *Community Strategies for Children and Families: Promoting Positive Outcomes,* was held at The Carter Center in Atlanta, February 14–16, 1996, and was co-sponsored by The Carter Center Mental Health Program, the University of South Florida's Florida Mental Health Institute, and the Center for the Study of Social Policy.

With our goal of developing a strategy for a national movement committed to improving outcomes for children and families, we began to ask questions like:

▼ Is a national movement to promote positive outcomes for children and families possible?

▼ How can we raise public awareness and increase the necessary political will?

▼ If a national movement is possible, what vision will drive this movement?

▼ What strategies are necessary to foster such a movement?

▼ Who should be involved in this process?

▼ What outcomes for children and families should we be striving for?

▼ What are the barriers?

To begin to address these questions, we gathered a small but diverse group of leaders representing foundations, academia, family members, neighborhood and community initiatives, government, and policy organizations with an interest in children and families to consider this concept of a national movement, and to raise possibilities we might have overlooked. What resulted was a lively, interactive two and one-half day conference with substantive input and insight from our participants.

We invited Charles Bruner, of the Child and Family Policy Center in Iowa to submit a keynote paper to outline a vision for Symposium participants. In addition, each co-sponsoring organization presented a paper which suggested a particular strategy or approach to support the implementation of this vision, and to enhance discussion regarding outcomes and strategies. In these proceedings, you will see a summary of each of these four papers.

The Results

Following the summaries you will see a reflection of the group's discussions which resulted from the presentation of the papers.

It is impossible to capture here the richness and depth of the dialogue, or the candor and commitment with which participants tackled complex issues. Despite diverse backgrounds and agendas, we were able to make significant steps forward. Our "Next Steps" section of these proceedings indicates some of the preliminary follow-up work in progress which are building upon the Symposium dialogue.

We invite your responses to this report and invite continued collaboration and partnerships among organizations at every level who are working to make a difference for children and families. Clearly, our collective knowledge and dedication is a resource that must not be wasted in attending to America's children.

We wish to gratefully acknowledge the supporters of this Symposium, without whose generous contributions this meeting would not have been possible:

The Center for Mental Health Services
National Institute on Disability and Rehabilitation Research
Annie E. Casey Foundation
Freddie Mac Foundation

We sincerely hope that these proceedings will prompt continued thinking, discussion, and action toward promoting positive outcomes for children and families.

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We have to develop a national vision that's based upon some new covenants between individual and state, and new ways of linking the public and private and professional and voluntary. We have to base it upon the lessons and voices from the field, but with a clear articulation of the responsibility of federal, state, and local government to support children and families.

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A Vision for Children, Families and Neighborhoods

Each of us must work to recognize
the path and our responsibilities in clearing it.

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You have to start dealing with racism and classism and sexism where you are. And the process is an introspection and self-analysis of the way you think and act. Then you look at the way you deal in your surroundings and move it out from there.

— Otis Johnson

By Charles Bruner
DIRECTOR, CHILD AND FAMILY POLICY CENTER

There is a growing recognition that too many children in America are experiencing "rotten outcomes"—particularly children of color and those living in disinvested neighborhoods. Crime and violence, poor health, poverty, inadequate education— the list is long, and the number of children affected is growing at an alarming rate.

This country, its economy and its families are failing to provide sufficient support to too many children for them to develop and achieve reasonable aspirations.

Perhaps the best framing of this problem is through raising a simple question:

How can we succeed with children that current systems fail?

It is strategic to focus attention not simply on the problem, but on the need for developing a solution that ensures a minimum standard of success for children.

But before we can begin to answer the question, it is important to review what we know about the correlates for such success.

Conditions for Success

Identifying the conditions needed for a child's success is done best at the community, and not the individual or family level. Whether one starts with a specific desired outcome such as school completion, or looks at success in broader terms, a common list of essential underlying conditions emerges:

- ✔ Economic and physical security.
- ✔ Environmental and public safety.
- ✔ A nurturing, stable family environment.
- ✔ Adult mentors and role models in the community.
- ✔ Positive peer activities.
- ✔ Opportunities to exert effort and achieve success.
- ✔ Health care for medical needs.
- ✔ Decent schools and schooling.
- ✔ Access to professional services to treat conditions or needs that may require professional care.

Because people see these conditions as pathways to their own success, it isn't hard to agree that they are needed to achieve high levels of success for children.

If one accepts these conditions, what strategies must be developed to take on this task? Clearly, improving the quality and range of professional service systems, including schools and medical care, is an important part, but only a part of the answer. Merely improving the system will not be enough.

To develop viable strategies, we must fully understand the scope of the problem.

Dimensions of the Problem

As state and national child-based data-watches have shown, the trends in the well-being of children on a number of dimensions are quite disturbing. While some of these have undergone dramatic increases in the last eight years, they are largely part of longer term trends. Two of these—*the increase in rates of unprepared and single parents*, and the *increase in the number of children residing in distressed and disinvested neighborhoods*—while controversial in their interpretation,

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serve as a synthesis of the challenges facing America.

Unprepared Parenting: First, children are increasingly likely to be raised, during at least part of their childhood, within a single-parent home, particularly in the critical early years of life. The increase in single-parenting is a long-term societal trend with adverse consequences to children, both because of the greater economic jeopardy of single-parent households and generally fewer supports for the children.

Further, it has long been recognized statistically that parental education is one of the strongest determinants of child success. Less-educated women are more likely to bear children, and do so at younger ages and with less likelihood of spouse's support. However effective our education, human services, and other systems are, they face continuing challenges to merely keep society in the same position it is today, given the different birthrates and likelihood of marriage for women with different educational backgrounds. Analysis of data regarding childbearing by 25–34 year old U.S. women by educational level leads us to a sober conclusion: that we are producing four generations of children raised by high school dropouts for each three generations of children raised by college graduates; that their family size is larger by a factor of three to two; and that they are much less likely to be married and receive two consistent sources of social and economic support. While these figures do not mean that society is going backward educationally, they do mean that we are facing continual challenges to raise educational aspirations and attainment for a large portion of children who come from family backgrounds that have not achieved success in school.

Residing in Disinvested Neighborhoods: Second, the failures our children experience are concentrated, geographically and ethnically. Children who live in seriously distressed neighborhoods have a much heightened risk of failure, across all dimensions of physical, psychological, social, economic, and educational well-being. This is true in both metropolitan and rural communities.

Unfortunately, there are no tested, large-scale "solutions" to preparing parents or eliminating neighborhood distress that simply require reasonable diligence in replication. At best, we can point to an increasing array of small-scale beacons of hope, showing promise in their ability to swim against the tide and achieve new results.

Shortcomings of Current Public Responses

It has become distressingly clear that public strategies, particularly those directed to unprepared parents and within distressed communities, do not address the totality of conditions needed for high levels of success. The majority of public funding for children and families addresses only the bottom set of conditions on the list of conditions for success, often on the reactive and ameliorative, professional service side. Often, these publicly funded programs deal with individual needs and problems in isolation from the community conditions which helped create them. They take paternalistic and self-contained approaches with the families they serve, even when their diagnosis clearly shows the need to address other missing conditions to achieve success. They stress professional-to-client interactions, rather than building self-help and voluntary networks.

Meanwhile, economic development activities generally are viewed from the perspective of the current configuration of economic consumers and producers, rather than the possibility of the emergence of new markets and entrepreneurs within disinvested neighborhoods. Development efforts which are designed to produce better housing or create new jobs often do not link these efforts with specific activities to create workforce readiness or residential stability. Neighborhood organizing efforts to construct new voluntary networks of support represent, at best, small and marginal add-ons to the dominant stream of public response. They usually lack the authority or power to leverage responses to the demands from consumers they produce—on the service, infrastructure (housing), or economic opportunity side.

While the emphasis upon collaboration to address child

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We have to find ways to address the challenges facing our children and families at risk, and to support all children and families. We know the value of a child who is encouraged and supported and helped to become a successful citizen. Our challenge is to develop actions and strategies that will make children feel safe and cared for and hopeful about the future.

—[illegible]

and family needs has moved from an end vision of "service collaboration" and "service integration" to a broader one of "community collaboration" and "community building", only the first tentative steps have been taken to make this a reality. When mention is made at a community collaborative that "the real issue is jobs," there is often a collective sigh, depicting an acknowledgement of the truth of the statement and the fact that no one feels they have the power to do anything to address it.

While there is not consensus on whether public funding can (or should) be used to aid in the construction of many of these conditions, most notably the natural networks of support, I believe we must take this task on to achieve success. Moreover, we must seek to define the role of government and the public sector in a manner that can lead to consensus.

If one accepts the premise that we have identified those fundamental conditions that must exist to improve community-wide measures of child success, what strategies must be developed to take on this task? Clearly, improving the quality and range of professional service systems, including schools and medical care, is an important part, but only a part, of the answer. Merely improving the system, unless that in turn produces voluntary networks in the community, more nurturing parents, and greater economic opportunity, will not be enough.

This returns to the need to more directly address the issues of unprepared parents and distressed and disinvested neighborhoods. Helping parents become prepared and regenerating neighborhoods suggests very differently structured services, supports, and opportunities. Existing systems must make concerted efforts to connect families with a constellation of voluntary networks of support within their communities. There are at least four different types of strategic reform efforts. Each must be addressed to ensure that conditions exist for children to succeed at high levels.

1. New Forms of Family Supportive Frontline Practice

The family support creed starts with the statement, "All families need support," recognizing the universality in the human condition. While many family support programs have a parent education thrust, the principles of effective practice suggest they be holistic in their approach, partnering with families in setting and reaching family member goals.

Experiences from the most promising efforts suggest that, particularly when working with families whose parents are most unprepared, frontline workers must address a hierarchy of needs. While the long-term focus may be on child development or family self-sufficiency, the first work may involve stabilizing the family and meeting basic needs for housing, food or safety. After stabilization, parental stress and adult needs must frequently be addressed before beginning developmental work on parent and child issues.

As the parent or parents begin to see new hope and opportunity, parental expectations for the child emerge. As families gain confidence, they connect with others experiencing the same kind of growth in order to themselves contribute and share. They become part of those elaborate social ties that are the conditions of a healthy community. In a terminology particularly in vogue, they create the "social capital" needed for communities to experience growth.

2. Reconstructing Public Systems to Embrace New Principles

One critique of the current system of professional services

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and supports is that it, in fact, has weakened social responsibility and social bonds, serving to deplete and not construct the social capital needed for community growth.

It is not that education, medical, child welfare, mental health and a host of other services are not needed by unprepared parents and disinvested neighborhoods to achieve success. Rather, it is that they are too remote from people's lives, disempowering to those they seek to serve, and rigid in response.

Systems reform extend beyond a more effective means to coordinate response across professional lines. It involves reform within each system. It means new forms of practice that recognize the need for both professional and experiential expertise. The distance between professional and community must be lessened in hiring practices; it must also be lessened through the way professionals define their role with nonprofessionals.

3. Building Social Capital Through Collective Action

While the first two strategies can contribute to the creation of social capital, they are unlikely to produce the breadth of natural networks of support, social links, and community norms that are needed to insure high rates of child success. A third strategic area involves building that social capital in neighborhoods where the community fabric is torn or threadbare.

There are at least two approaches to constructing this social capital. The first is to establish additional programs designed to serve this purpose -- recreational leagues, youth development activities, civic involvement events. This provision of new "primary services" may be through neighborhood residents stepping forward or through intermediaries from outside the neighborhood providing them. If intermediaries are used, however, efforts must be developed to convert from operation by those outside the community to operation by those within.

The second approach is to enable neighborhood residents to construct their own versions. This involves supporting and facilitating neighborhood organizing that helps provide pathways for those latent "social capitalists" to come forward and build those networks of support. Such organizing can also produce the civil society needed to support and enforce community norms.

While both may be part of an overall strategy, the latter is likely to be more fundamental. In the long term, these networks of support should be self-generating and naturally occurring. Eliminating barriers that impede their creation is preferable to providing substitutes for their absence.

A final comment on the development of these networks is that it has a strong moral and spiritual side. It is essential that reforms recognize the power of this spiritual dimension and not shy away from it. This means more concerted outreach and work with faith communities. It also means recognizing and validating spiritual and moral motivations of those involved in reform, recognizing that external gains and rewards alone are unlikely to sustain the efforts of reform.

4. Creating Economic Hope and Opportunity

This fourth area may be largely new territory to those with backgrounds in the education, health and human services worlds. Yet addressing the economic aspirations of families and communities is another essential ingredient of success.

An early implementation assessment of the Head Start program provided this commonsense advice: *Ask the community to identify its problems, concerns and needs.*

That point may seem obvious, but experience shows reformers very frequently are unprepared to take the next step: If you ask community members for their views, you have to be prepared to listen to what they say. In disinvested neighborhoods, issues of jobs and economic opportunity certainly end up high on the list.

That does not mean comprehensive reform efforts in the education, health and human service worlds must all take on the tasks of economic development. It does mean that they need a clearer understanding of how these needs can be addressed, developing alliances with those who can address them, and ensuring that their own work with families helps to create skills commensurate with the development of economic opportunities.

Critical Mass

The challenge is to help whole neighborhoods begin to see new possibilities. Helping individual families while leaving untouched the lives of their extended family, friends and neighbors slows the work being done. At worst, the influence of

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The willingness to change is an opportunity to put forward an argument for an approach fostering the development of resilient children as a viable strategy which will eventually enable people to lift themselves out of poverty.
— John Gabarino

others will subvert the family's progress; at best, the family may be forced to leave behind a part of what it values most.

At some point, when there is a critical mass of activity of families supported and growing and experiencing opportunity, there is potential for everything to change. Families see they are not alone, they can help others. This synergy is both a byproduct of the process and its glue.

Clearing the Path

Obviously, achieving this level of commitment to change and investment of resources will not happen easily or occur overnight. At this time there is neither the capacity to design such ambitious reforms nor the structure to carry them out.

But it will never happen unless we ready ourselves and consciously and concertedly take on the task. Successfully addressing the question, "How can we succeed with children that current systems fail?" entails constructing a compelling national vision and a grassroots social movement that embraces it. It means new responsibilities for all of us who espouse the need for more effective services and support for children and families.

There are several steps we can identify which might lead us toward the development of the capacity we currently lack:

1) Develop a Compelling National Vision and Role — While there is increasing recognition of the problems facing children and families in America, and there are many individual initiatives undertaking one or another of the strategies described above, there is not a vision for what could be for children that provides a call to action on a national scale. The federal government has a major stake in this well-being and bears the greatest share of current social costs for failing to achieve it. Over the short-term, block grants and a de-entitled federal environment may limit federal liability. The exchange of greater state and local flexibility for less funding may facilitate additional experimentation and innovation at the state and community level. Both can easily move reformers in the direction of state and local action.

In the long run, however, the federal government must play a major role both in financing and in supporting comprehensive reform efforts, particularly in poorer states and communities where the resources do not exist. The vision to be created must describe the reasons for federal involvement and the federal government's role and responsibility in protecting and supporting children.

2) Grassroots Mobilization for Needed Reforms—The strength of the Christian Coalition rests not in the shrewdness of its leadership, but in the numbers and passion it can mobilize at the grassroots. This mobilization is possible in large measure because

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it has established a vision that is more compelling than others currently available, one that resonates with a broad swath of working Americans anxious about their, and their children's future.

We need to develop an alternative but equally compelling vision that draws in community-based organizing and development groups, and constituencies of color. Current policy development, associational, and programmatic leadership is largely white and needs to change.

In short, it requires resolving, among all who need to be a part of that broad base, those issues of race, class and gender that the larger society has so poorly faced.

3) Involvement of the Corporate World—It has become common to espouse the commonality of interests between the corporate and human service worlds. Economic growth is dependent upon workforce skills that increasingly depend upon higher-level thinking and problem-solving skills. Coupled with the aging of the population come arguments of the need for the younger workforce to be increasingly productive to sustain those outside of it. The appeal to corporate self-interest for an educated workforce alone may not be sufficient to attract the needed commitment from the corporate world. Community self-interest, however, may. Corporate leadership and talent must commit to examining this potential workforce in a new light, as must the community in making its commitment to workforce development.

4) Expanding the Knowledge Base—While new connections are being made, a vision formed, and a grassroots base developed, we must admit to all that we do not know. This is not easy work. There are many well-meaning programs and well-intentioned staff that produce little good. The required practice transformations—in mainstream and emerging preventive systems of support—are profound and difficult. This isn't rocket science—it is much easier to guide a piece of metal through space than predictably guide and nurture human growth and social regeneration. At the same time we push for reform, we must gain answers to some critical issues about how workers and programs can succeed.

This knowledge-building does not need to come from scratch, with new demonstration projects and experimental designs. Indeed, exemplary programs and initiatives have produced at least proximate answers to many of the questions that must be addressed. Yet we must do a much more concerted and critical job in collecting these lessons from the field.

There may be no model that we wish to place above others for communities to embrace, nor a process or structure for decision-making and governance that guarantees success. Yet we need a disciplined approach that recognizes success, as well as ineffectiveness. Without this knowledge, we cannot produce the type of movement and support we need.

5) Committing to Work Together, Intensively, and for the Long Haul—The causes of this country's, and its children's, predicament did not occur overnight and they will not be resolved overnight. Generational issues do not lend themselves to solutions within election cycles. The challenges are long-term and should be seen as such. This will require a shift in the manner in which we support reforms. Technical assistance must be flexible, individualized, comprehensive, community-based, asset-oriented, seamless, and timely. It requires intensity and duration of involvement, a long-term commitment that most national technical assistance providers do not now offer. Administrative leadership from persons within existing public systems in changing the character of their systems will be required. In addition, we must pay careful attention to the way we assess progress. The approach to assessment in innovative and entrepreneurial activities is different from the approach to assessment of those seeking to replicate prior successful efforts. Above all, we must not be intimidated by the current scientific approach, but seek to construct a scientific approach appropriate to our work.

While the challenges raised here seem daunting, they are not impossible. Recent years have seen dramatic growth in reform efforts and a much deeper understanding of the importance of taking on this task. Many seeds have been planted. There is a greater readiness to the concepts being proposed here, but there is much work to be done.

This does not mean that everyone has to take all steps at once, but rather that each of us works to better recognize the path and our responsibilities in clearing it. In the end, who else but ourselves can we expect to commence this work?

Fostering Resiliency

Fostering resilient children is the key to building America's human infrastructure.

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The real issue in any discussion of children at risk is the distribution of resources, yet it isn't being addressed. You really can't talk about anything else happening with families and children unless you are willing to face the fact that too many families and too many children live in a society that does not fairly allocate resources. One percent of the population owns 40 percent of the wealth—that unfairness creates havoc for families.

—[illegible]

By John Gates
DIRECTOR, THE CARTER CENTER MENTAL HEALTH PROGRAM

Not since the initiation of Head Start 30 years ago have demographic, economic and political circumstances been so advantageous for the emergence of widespread support for a coordinated, national strategy focused upon young children and their families. Specifically, it is now the best of times for a major investment in fostering the development of resilient children—those with characteristics that enable them to work well, play well, love well and expect well.

While the preceding statements may seem paradoxical in the context of recent changes in American political life, circumstances converge to create an exceptional opportunity. These include growing *perception* of the failure of social supports, increasing concern about the health and development of our children, increasing attention to preserving and strengthening families, and the devolution of authority with the expectation of doing more with less. It is an opportunity to establish priorities for the development of healthy and resilient children on the public agenda, to articulate positive goals for our children, and to have such widespread support for those goals that a long-term strategy to achieve them will be sustainable. It is an opportunity, in effect, to close the gap between what we know about positive child development and what we actually practice.

This is the time to develop a national agenda that reflects a social policy that every child 0 to 6 years of age should have available a range of programs and supports that will enable each child to acquire the characteristics of resiliency by the time he or she enters school.

Why Resiliency?

The existing myriad of programs applied to child and family life must seem like a patchwork quilt to most persons inside and outside the human services field—because it is. The varied goals, jargons, procedures and agencies do not lend themselves to the appearance or the reality of a coordinated, easily understood set of goals for children and families.

Without implying that there is not value or even a need for a range of goals and procedues, the adoption of an easy-to-understand single rubric would help to convey coherence to the present diversity, and perhaps further the potential development of a coordinated social strategy to bring the programs for children and families to scale. "Resiliency" as a term, a concept and a goal should be considered for that rubric.

Bonnie Benard and Emily Werner have described the characteristics of resislient children. Resilient children are *socially competent* (responsive, flexible, empathic, caring, with good communication skills, a sense of humor, and an ability to elicit positive responses from others), *have problem-solving skills* (to think abstractly and reflectively, with an ability to develop alternate solutions to cognitive and social problems), *are autonomous* (independent, with an internal locus of control, a sense of self-esteem and self-discipline, and a sense of power to exert some control over one's environment), and *possess a sense of purpose and a future* (healthy expectancies, goal-directedness, motivated for career and educational achievement, persistent and hopeful, with a sense of a compelling future).

A child's acquisition of resiliency is more likely to occur if the child develops in family, school and community environments that also exhibit certain resilient characteristics. In all these environments, the characteristics include:

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✔ Caring and support (from teachers, parents, peers and social groups).

✔ High expectations (family expectations for maturity, learning and success, school administrators' and teachers' expectations for academic achievement, community valuing of youth as contributors and not just consumers).

✔ Opportunity for youth participation and involvement (doing family chores, helping others in school, providing literacy classes to adults).

Resilient children have also been described as having a determined approach to problem-solving; a tendency to evaluate experiences constructively, even in the face of objective adversity; the ability to engender positive responses from others; and an ability to view life and their future as positive and meaningful. The existence of these characteristics combined with stable support from caretakers seems to protect these children, enabling them to cope effectively with adverse circumstances as diverse as divorce, poverty, mental illness, addiction and war.

Qualities of Resiliency

Resiliency is akin to the concept of wellness, which is broader in scope than the concept of primary prevention and reflects the assumption that sound early wellness formation may be among the best possible inoculants against a range of adverse outcomes. It also assumes that all people, not just those at risk, stand to profit from wellness enhancement.

These same ideas may be applied to the term "resiliency," and support the appeal of a term that conveys positive, proactive goals for everyone.

Indeed, publications in fields such as mental health, education, family support, health promotion and community development describe many innovative programs with similar ideas.

Common Ground

Ideas that seem to enjoy general agreement throughout the country include: the need for programs geared to each developmental stage; a focus on both the child and the family; the expansion of the functions to be served or supported by schools; and the need for support from all significant sectors of society to include the business, faith, communication and entertainment communities as well as

Healthy Development & Resiliency

In *Today's Children: Creating a Future for a Generation in Crisis*, Dr. David Hamburg reviews many innovative programs from the pre-natal to the adolescent period. While acknowledging there is still much research to be done to help us better understand child development, family dynamics and community change, the book provides much evidence of programs that reliably foster healthy development.

Hamburg lists seven conditions that foster healthy development in childhood and adolescence:

✔ An intact, cohesive nuclear family, dependable in every crunch.

✔ A multifaceted parent-child relationship with at least one parent who is consistently nurturing and loving and able to enjoy child-rearing, teaching and coping.

✔ Supportive extended family members who are available to lend a hand.

✔ A supportive community, whether it be a neighborhood, religious, ethnic or political group.

✔ Parents' previous experience with child-rearing during their own years of growth and development, for what amounts to an ongoing education for parenthood.

✔ A child's ability to perceive future opportunities and a tangible basis for envisioning an attractive future.

✔ A reasonably predictable adult environment that fosters gradual preparation for adult life.

Hamburg's conditions for healthy development actually resemble the characteristics of resiliency presented earlier. They are also similar to what Emory Cowen calls "wellness pathways." The five pathways are:

✔ Forming wholesome early attachments.

✔ Acquiring age-appropriate competencies.

✔ Exposure to settings that favor wellness outcomes.

✔ Having the empowering sense of being in control of one's fate.

✔ Coping effectively with stress.

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Programs that foster resiliency can be offered to *all* children, not just those at risk, and can be viewed as relevant to persons of *all* income levels. The characteristics of resiliency are expressions of what we are striving for in *all* our children and families.

natural caregivers, government and private agencies.

Despite these areas of agreement, we have not been able to generate broad enough support to develop and sustain a strategy to bring programs to scale. Many persons in middle- and high-income levels who do not live in high-risk, impoverished environments have come to view programs specifically targeting at-risk children and families as not relevant to their children and families, costing higher taxes, ineffective and hence a waste of money. They appear to support government officials who wish to cut back on such programs.

Programs that foster resiliency can be offered to *all* children, not just those at risk, and can be viewed as relevant to persons of *all* income levels. The characteristics of resiliency are expressions of what we are striving for in *all* our children and families.

A Positive Approach

Unlike prevention, treatment and rehabilitation programs that are clear about what they are striving against once problems have occurred, the development of resiliency enables us to communicate in positive terms and base programs upon strengths, abilities and skills. Further, the characteristics of resiliency are those that equip individuals to more effectively cope with the challenges and adversities of life.

Resiliency in particular refers to habits, skills, qualities and attitudes that are concrete rather than abstract, prevent problems, and are aligned with traditional family and community values.

Further, there is good, if not perfect, scientific support about programs that foster resilient characteristics. Thus the appeal of programs and goals can be based upon good data, not just good intentions.

The concept of resiliency is well-established both empirically and conceptually in the field of child development. The original goals of Head Start focused on the development of precisely the same characteristics used to describe resiliency.

Children who have the characteristics of resiliency are in a sense immunized—they are more resistant to the ill effects of life's stresses and risks. To carry the analogy a bit further, it might be said that individuals who cope well are likely to be those who can help and support others. They can become, in effect, a potential source of social capital to their peers as children, and to their children and communities as adults.

A Caveat: If Not Resiliency, What?

Having attempted to make a case for the adoption of resiliency as a commonly agreed-upon term, there are two points which must be made.

- First, I do not view resiliency as sacrosanct. What is important is that some term be adopted. And, if the case made here prompts debate regarding alternatives, a useful purpose will have been achieved.
- Second, the adoption of a single term by itself will not be the alchemist's magic formula that brings the programs to scale. The important point is that a commonly agreed-upon, discussed and marketed term can help public understanding and manifest support for a national agenda to reform support for children and families. —*John Gates*

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Neighborhood Networks of Family Support

System change at the neighborhood level will create better futures for children and families.

By Frank Farrow

DIRECTOR, CHILDREN'S SERVICES POLICY, CENTER FOR THE STUDY OF SOCIAL POLICY

A young mother in Los Angeles is reported to Child Protective Services when her eight-year-old daughter misses several days of school, and finally arrives one day with strap marks on her legs. An investigation confirms excessive discipline, but instead of receiving numerous visits from a child protection worker, the mother is helped to join a group at a nearby church which has opened a drop-in family resource center. A therapist from a recently opened, minority-owned non-profit agency in the neighborhood works with the mother, the church, the mother's aunt and a job training program in the neighborhood to ensure good after-school care for the daughter and a work-study program for the mother.

▼

A young couple in Cedar Rapids, Iowa, falls far behind in their bills when the husband is laid off work. His drinking increases, and the tension in the family starts affecting their three young children. A friend in their neighborhood association (in which the husband has participated by helping to clean up a vacant lot) observes their difficulties and tells the husband about the help available from the family resource center which the neighborhood association helped to start. The family receives cash to pay bills, debt management counseling, and the husband is helped to develop a new skill, leading to a new job.

▼

A teenage mother in Louisville, Ken., drops out of school after the birth of her second child. She becomes isolated, and copes less well with the needs of her toddler and the new baby. A community police officer stationed at the nearby Neighborhood Place alerts colleagues there—a nurse and a social worker—and within three months the young mother is back in school. She has good child care arrangement provided by a neighbor's day-care and funded through the professional stationed at Neighborhood Place.

Widely separated by geography, these three families share similar experiences. Their common bond is that they are all helped by people and places they know well: relatives, their faith community, a drop-in family center and a neighborhood school. For these parents, assistance from familiar faces and places in their neighborhood seems to have happened in the natural course of events.

In fact, these resources are not there by chance. Los Angeles, Cedar Rapids and Louisville are among a growing number of places across the country that are deliberately creating what can be called "neighborhood networks of family support." These networks include public sector and private sector entities, service providers and other community organizations, working together in new ways to make life better for families and children. These networks share a common premise: Conditions will not improve for many families unless they receive the help they need closer to home, and in a form attuned to the conditions in which they live.

A broad movement to improve conditions for families and children should include neighborhood support networks for several reasons.

First, neighborhood-based strategies fill an important gap that now exists in the reform under way in child welfare, mental health, education, health and other service systems. Most reformers' attention has been at the program level or, at the opposite extreme, on matters of broad policy and fiscal change. What is missing is knowledge and experience about how these

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Focusing on what works at the neighborhood level can provide a showcase for successful strategies nationwide. This lack of a sense of accomplishment is one of the biggest shortcomings of the current reform discussion.

two levels of change come together to alter the immediate environment where families live.

Second, neighborhood-based strategies are important for organizing support for a movement. For most people, mobilizing on behalf of this issue will be simpler if they believe it is about changing conditions in their own community. One reason there has been so little popular support for strategies to improve the conditions affecting families and children is that the cause has been too abstract. The call to action seems to be on behalf of "other people's" children. A focus on neighborhood-based strategies helps clarify that this is about *our* children in *our* communities.

Finally, neighborhood-based strategies are important because success can be shown sooner rather than later. Many changes on a national level require decades to complete. Results can be shown for individual families in a neighborhood in a matter of months, and for a neighborhood as a whole in a few years. Focusing on what works at the neighborhood level can provide a showcase for successful strategies nationwide. This lack of a sense of accomplishment is one of the biggest shortcomings of the current reform discussion.

The Neighborhood Network Approach

Neighborhood networks of family support are deliberate, ongoing and structured arrangements at the neighborhood level among public and private organizations, and informal and formal supports. They serve the explicit purpose of responding more immediately and flexibly to families' needs to improve the health, safety, economic, educational success and overall well-being of children.

The essential part of this definition is the strong commitment to "place" that distinguishes these approaches. Focusing on neighborhood is a way to ensure that assistance is provided to families *when* they need it, *where* they need it and *how* they need it.

Efforts to locate services in neighborhoods are not new, of course. Most major social service change initiatives of the past 30 years have given at least rhetorical commitment to this goal. However, most past work to develop neighborhood-based services has suffered from serious weaknesses in important ways:

▼ Past efforts usually focused on individual programs or collections of programs rather than on trying to bring many sources of support in a neighborhood together as a more effective system.

▼ Even more important, past strategies usually created new programs alongside the major public systems, but rarely tried to transform or incorporate those systems. Since most past efforts were short-term and project-oriented, the failure to engage public child welfare, mental health, income support, employment and training was understandable. But the willingness to create parallel service systems also doomed these efforts to limited success.

The reality is that major public systems control important resources, have compelling mandates and affect many families in profound ways. They must be at the core of any neighborhood system, which requires transforming these systems to operate in a way that is genuinely useful for neighborhood residents.

▼ A final flaw in past neighborhood-based efforts has been, ironically, that they often existed only at the neighborhood level. Neighborhood-based services are a mix of public and private support with links to and direction from outside the neighborhood that are often as important as the connections within.

Given the intergovernmental complexity of funding and

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delivery systems, it is not possible for a neighborhood to put together its own system of supports without policy, fiscal and personnel changes at higher levels of government. This creates a fundamental challenge: Many of the key decisions about a neighborhood-based service approach must be made by policy makers and administrators who have probably never set foot in the neighborhood.

In this context, the development of neighborhood networks of family support becomes complex. It involves a host of changes in service delivery, from new frontline practices to new ways of organizing agency staff and offices. It requires innovation in financing arrangements so funds for neighborhood-level staff do not inadvertently subvert the network's goals. Ultimately, this approach requires that accountability and governance be redesigned as well.

A Working Hypothesis

Experience with this new breed of neighborhood-based networks is still at an early stage. However, from the limited experience that does exist, it is possible to suggest a number of characteristics that seem to define a neighborhood network approach, and that provide a working hypothesis of its key components.

1. Neighborhood-based networks bring services and supports close to families. They are located in places that are welcoming, accessible and likely to be used. As noted previously, place is important to networks, but sheer proximity to families is not enough. Services and supports must be provided in ways that are not intimidating, and that communicate that these resources are part of the neighborhood.

2. Neighborhood networks are built around or involve the community's own organizations, and engage natural helping networks as supports for families. A major shift in these approaches is that much of the contact with families comes from entities that already exist in the community: schools, churches and neighborhood organizations. This means that these entities must take on new roles.

3. Neighborhood networks change the operation of public sector mainline systems. This is probably the most important test of these new arrangements. Do they change the frontline practice and staff deployment of traditional public systems, particularly the income support, mental health, child welfare, health, law enforcement, recreation and employment and training services? If these systems are untouched, the major resources they control will not be available to families in the most productive way possible.

4. Neighborhood networks often involve a new set of interactions among workers which could be called "radical teaming." A common factor in most of these approaches is a redefinition of frontline staff roles that comes from professionals of many systems working together and joining with other neighborhood people in helping roles. This goes far beyond the usual "joint staffing" of public and private agencies, and instead teams workers so closely that workers' roles begin to change. Workers see themselves as team members, and start doing whatever it takes for the team to succeed, rather than clinging to a limited definition of their professional role.

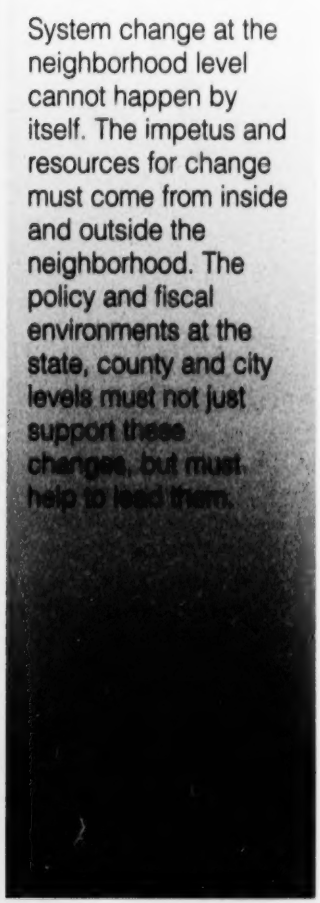
5. Neighborhood networks assume that support must be universally available, with specialized help for special needs in addition to the supports for all families. Some neighborhood networks start by focusing on specific needs. Over time, most adopt a broad-based mission of support for all families, with more intensive or specialized help for families that need it. The overall orientation builds on a neighborhood's assets, promotes the resiliency of each child and the capacity of each family, and recognizes that all families need support at some point and the community should provide that support.

6. Financing arrangements for neighborhood networks should (a) promote more flexibility in service planning at the frontline, and (b) create incentives for earlier supports and interventions. The basic shift is that financing for these networks is not done service by service, but rather on a capitated basis per family, or for a core support network which then has discretion about how best to deploy resources. Some network financing seeks to fund strategies for results, with the justification for the funding being the results achieved rather than the precise ingredients of the strategy.

7. Neighborhood networks suggest that governance structures and accountability need to (a) be re-defined on the basis of geography, rather than on the basis of service domain, and (b) have substantial neighborhood ownership. This is an area in which even the existing neighborhood networks are still evolving. However, experience

THE CASE FOR KIDS

System change at the neighborhood level cannot happen by itself. The impetus and resources for change must come from inside and outside the neighborhood. The policy and fiscal environments at the state, county and city levels must not just support these changes, but must help to lead them.



suggests that for these networks to be sustained, their governance will have to be shifted away from agency-by-agency accountability and toward a collective, community-wide accountability.

Several emerging neighborhood networks share other attributes. For example, some networks give consistent attention to the spiritual dimension of supports, recognizing—in a way traditional social services have avoided—that addressing this dimension of an individual's experience can be an important key to changing behavior. This openness to non-traditional approaches may turn out to be an important part of how networks succeed with families who have not been helped by traditional services.

Economic development is another critical dimension receiving attention. Linking families to employment opportunities in their communities not only strengthens the capacity of families to support themselves, but it builds neighborhood capacity to support all families. Without this dimension, the change associated with neighborhood networks will be partial.

What Will It Take?

System change at the neighborhood level cannot happen by itself. The impetus and resources for change must come from inside and outside the neighborhood. The policy and fiscal environments at the state, county and city levels must not just support these changes, but must help to lead them.

Within the dozens of ways that state and local policy makers can support this direction, several seem particularly important.

▼ Public agency managers' commitment to neighborhood-based service delivery is perhaps the most decisive factor. None of the three examples cited at the beginning of this article would have been possible without the commitment of a small group of public sector leaders. They are the only ones who can shift the funding and staff that create the critical mass of service delivery in the neighborhood.

This does not mean private sector and neighborhood leadership are inconsequential. Leadership from neighborhood residents are making these approaches work, but the decision to fund these new approaches can only come from the public officials who control the resources.

▼ New funding arrangements which allow local and even front-line flexibility can promote the growth of these neighborhood network approaches.

Policy makers should first consider how to shift the dollars; service delivery shifts will then follow.

▼ New approaches to professional development are necessary if neighborhood networks are to maintain their fresh approach and ensure service quality.

Old models of training professionals within their separate disciplines must be modified or discarded. Professional development in this approach must instead be cross-professional—training people together in a common core of perspectives and skills, and must also incorporate new content on issues such as working in teams with colleagues and working in partnership with families.

▼ To sustain these approaches, new methods of neighborhood-based governance must be developed, reflecting the same principles of inclusiveness and participation as are embodied in these service delivery approaches.

Professionally managing the service delivery is one issue, but the more challenging task is to develop methods for neighborhood residents to have a voice in how these systems are administered, and some oversight in order to hold them accountable.

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New Forms of Leadership

Leadership teams are needed
to implement a new vision for children

By Robert M. Friedman
UNIVERSITY OF SOUTH FLORIDA, FLORIDA MENTAL HEALTH INSTITUTE

Despite many significant changes in the way services and supports are provided for children and families in the United States, the condition of children and families seems to be deteriorating. In response, policymakers at all levels of government, representatives of public agencies and grassroots organizations, family members and concerned citizens are searching for ways to reverse this negative trend and achieve more positive outcomes for children and families.

Clearly, a new approach to supporting children and families is needed. This new approach should build upon significant developments in service system reform, and community and neighborhood development. It should be designed to build social capital in the communities and improve outcomes for children and families. In addition, a reform movement should embrace several approaches as reflected in the previous papers.:

▼ Reforming service delivery systems to be preventive in focus, family-oriented, community-based, comprehensive, integrated and accountable.

▼ Providing individualized, culturally competent, family-focused and comprehensive services.

▼ Building upon natural helping networks in neighborhoods such as churches, neighbors and service organizations.

Expanding upon existing social capital in the neighborhoods.

▼ Addressing the full range of child and family needs including housing, jobs, economics, safety, health, education, recreation and child care.

▼ Reaching a level of scale in system reform and in the efforts to build upon social capital that is likely to have a sizable impact in a community.

▼ Ensuring that services and natural helping networks build positive characteristics that promote resilience and wellness.

The Issue of Leadership

There are infrastructure needs that must be met if this effort is going to be successful. In particular, there are issues related to the leadership needed to bring about these improvements. Traditionally, a leader is someone who is able to get a group of individuals to go beyond their individual goals to work together for a group goal.

More recently, as organizations and systems recognize the need for rapid change, an increased focus is on those leaders who are able to change the course of an entire organization—typically called *transformational leaders.*

This concept of leadership is focused on the visionary, often charismatic, leader who is able to have great influence on his or her organization.

Such leadership is essential for changing the traditional ways in which service delivery systems, individual agencies, and individual practitioners have organized and provided supports and services.

Unless organizations are guided/led/inspired/persuaded/cajoled to consider new models of operation, the changes necessary for a new vision will not take place. One task, then, is to stimulate and support this type of transformational leadership within organizations.

Leadership Across Organizations

It is also essential, if the vision is to be realized, that effective partnerships be created, built on trust, and striving toward mutually beneficial goals. One term for these partnerships is "collaboratives." These partnerships cross organizational lines. They also involve partnerships

among different service delivery systems, different levels of government, formal agencies and informal organizations, professionals and parents, residents of the community and concerned individuals from outside the community.

The transformational leader in this new model must not only be able to change models of operation within his or her own organization, but be able to carry partnerships and collaborations to a new level of practice. This is a tremendous challenge, and calls for community-building skills that are often among the most difficult for leaders to demonstrate.

Such partnerships cannot be rushed, either. They must be built up gradually over time, as trust develops and shared goals become clearer. They require skills and qualities that are often associated more with good management than with good leadership:

▼ Dependability.

▼ Excellent follow-through.

▼ Clear communication skills.

▼ The ability to set one's own ego aside in the interests of the group .

▼ A willingness to roll up one's sleeves and work on the nitty-gritty but important tasks that make the difference.

Therefore, while leaders are needed who can transform an organization, a community and a system within their sense of vision and purpose, leaders are also needed who can transcend an individual organization, service delivery system, or level of government to form *leadership teams* that will work day after day on the myriad tasks that need to be completed. The individuals on these teams must be durable over time — not only must they be available and willing to make a long-term commitment, but they must grow well on people rather than wear thin on them.

Often the leaders with great vision start the change process. However, the leaders with great staying power determine whether the process will become successful. Both types of leaders are needed if a vision of new ways to support children and families is to become successful.

The symbolic leadership function, primarily associated with the transformational leader, involves persuasion, identification of issues, and creation of vision. The strategic and tactical functions of leadership which ensure the vision is translated into effective strategies, and that the procedures are in place to effectively carry out the vision, are just as essential as the symbolic leadership function. This is particularly true as new technologies emerge with the potential to contribute to the change process, if effectively integrated into the ongoing operation of organizations in the community, and if their use supports the mission of the community collaborative.

Developing Leadership Teams

How do we identify and build the leadership teams with the capacity to bring about the needed changes? First of all, the task may require recognizing what it takes to get the job done. The visionary leader, for example, must recognize the kinds of qualities that will be essential to operationalize his or her vision. This is particularly important with a vision in which service delivery systems and neighborhood leaders are to work productively together. Oftentimes there

are socio-economic, educational, and racial differences, and years of mistrust to overcome. Neighborhood residents, more than anyone else, want to see better lives for themselves, their families and their neighbors.

One of the approaches to building collaboratives is a five-step process designed to implement more effective systems of educational and human services. It begins by simply getting the right people together and securing a commitment to collaborate. This stage is followed by building trust through establishing common ground. A mission and vision are developed, based on common knowledge and a community assessment. Then a strategic plan is formulated, including a definition of targeted outcomes and the roles of individual and organizational members of the team. The next stage is to implement the plan and evaluate its progress. This leads to bringing the changes to a scale that is likely to deepen the collaborative work, result in an ongoing governance structure and expand the scope of change.

The development and maintenance of such trans-organizational leadership teams is a complex and critical task that represents a stretch for the leadership field, the human services field, and the community development field. The challenge is to recognize that a new type of leadership organizationally and individually is needed to implement the vision of reform. A new kind of leadership is needed to create the mechanisms for supporting communities in developing these leadership teams while at the same time learning from their experiences to advance the state of practical knowledge.

A Summary of the Group Discussions: Barriers—and Common Ground

Following the presentation of the preceding papers, discussion was held in small and large group settings to consider the strategies presented and identify a potential courses of action. A summary of the key areas of dialogue follows:

Building Trust

Members of the communities being served should be part of the planning and implementation process. Trust is an essential component if families are to buy into and embrace a new approach to social services. There are no short-cuts to establishing trust within communities, but there are steps which can be taken to foster an environment which builds the type of partnerships which scarce resources demand.

During the symposium, an ad hoc caucus group formed to begin to articulate the elements necessary for true partnerships at the community level. In response to the papers which were presented and to the initial dialogue of the conference, this caucus group felt greater attention needed to be focused upon the role to be played by members of the indigenous communities in the planning and implementation of conferences and programs designed to serve them. While such suggestions often remain theoretical in nature, this group offered specific recommendations about how to make this concept a reality.

The ad hoc group's stated principle, outcome, and specific recommendations inspired constructive dialogue which significantly shaped the remainder of the Symposium, and indeed, also have the potential for influencing future activities:

Principle: To respect, utilize, and include as partners African-Americans, Latino-Americans, Asian- and Pacific-Islander Americans, and Native-Americans to represent the authentic voices of their respective communities in the planning, presentation and implementation process for programs, initiatives, and conferences.

Outcome: A commitment to designate specific and appropriate allotments of time on all future conference and workshop agendas to enhance the discussion and understanding of racism, classism, sexism and power.

Recommendations:

▼ The papers presented were culturally blind and should be revised to integrate into their body of knowledge an analysis on the impact of racism, classism, sexism, and powerlessness. (The four authors are in the process of reviewing their respective papers with the assistance of representatives of minority groups to address these issues recommended by the ad hoc caucus group.)

▼ Persons representing the African-American, Latino-American, Asian- and Pacific Islander-American, and Native-American communities were marginalized by not being included in the planning, presentation, and writing of these papers and should therefore be included in these processes in future efforts.

▼ Redefine the term "expert" by recognizing and utilizing members of the indigenous communities to provide the technical assistance for their respective communities.

▼ Create an environment of reciprocity by transferring resources to the indigenous communities so that financial benefit can be derived from the experiences and knowledge base which originated from that community.

▼ Include an analysis of the role of racism, classism, sexism and power on the global reality.

▼ Include African-Americans, Latino-Americans, Native-Americans, Asian- and Pacific Islander-Americans in the process of determining what counts as knowledge, who has access to it, how it is distributed, and what are its ideological claims. This should be done through a process of recognition and crediting. The current tendency often is for foundations to exclude and control this discourse.

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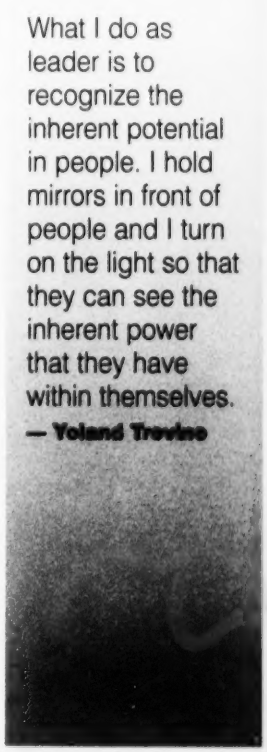
What I do as leader is to recognize the inherent potential in people. I hold mirrors in front of people and I turn on the light so that they can see the inherent power that they have within themselves.
— Yolanda Trevino

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▼ Utilize as resources and recognize the activities of the African-American, Latino-American, Asian- and Pacific Islander-American, and Native-American caucuses as a resource pool and knowledge base.

▼ Forward the agenda of cultural democracy as a viable approach to counter the deep rooted structures of institutional racism and therefore make the analysis and subsequent dismantling of institutional racism as a primary concern. Genuine trust-building efforts are needed as we attempt to address some of our country's most pressing concerns. What are some of those concerns?

Causes for Concern

The well-being of children in America, especially children of color and children residing in disinvested neighborhoods, is worsening. Consider, among hundreds of dismal statistics:

▼ In 1992, 26 percent of all American children under age 6 lived below the poverty line—a total of six million children. The number is growing.

▼ Households headed by women with children under age 18 comprise 46.1 percent of all families living in poverty. By contrast, 9 percent of households with both parents fall below the poverty level.

▼ Among 13-year-olds, 27 percent cannot add, subtract, multiply, and divide using whole numbers.

These statistics represent a drain on our national resources that is accelerating, and will continue to gain momentum as these children mature—and have children of their own. More important, however, the numbers represent a tremendous loss in terms of wasted human potential.

In an increasingly competitive, high-tech global economy, we cannot afford to squander our human resources any more than we can waste any other resource. Our economic viability and competitiveness, the comfort of our lives, as well as the sustainability of our lifestyles, may very well depend on it.

Consensus

There is, of course, a positive side. It is this: Most people agree there is too much deprivation and suffering by children, and that too many children are on the wrong track for success later in life. Regardless of political party or ideology, regardless of religion or ethnic heritage, they generally agree that:

▼ The decline of social capital or civil society—those natural caring networks within neighborhoods and communities—is an important contributor to children's poor life prospects.

▼ Current mainstream public sector responses and financing systems do not build this social capital.

▼ People must take personal responsibility for overcoming their situations to achieve self-sufficiency. We have to recognize that the role of government is not to do for people, but to enable people to do for themselves.

Interpreting our agreement is, however, difficult. There remain many unresolved issues and areas of non agreement—particularly what the public sector's role and responsibility is in building social capital, instilling social responsibility, and creating economic opportunity.

But even by agreeing that we have a problem, we have already taken an important first step in achieving a solution. What do we know about possible solutions?

Elements of Success

Many years of research and evidence have revealed what is required within a community for the community's children to achieve a high level of success. Whether we begin with a specific desired outcome—school completion, responsible sexuality, school readiness—or look at all factors together, a common list of essential underlying conditions emerges.

▼ Economic and physical security, within the home and the neighborhood.

▼ Environmental and public safety.

▼ A nurturing, stable family environment.

THE CASE FOR KIDS

A previous Carter Center survey revealed:

✔ Prevention and health promotion programs are not given high priority by the public, elected officials, or service providers;

✔ Funding to support the implementation of prevention programs is inadequate;

✔ The general public is not aware of the effectiveness of existing programs.

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- Adult mentors and role models in the community.
- Positive peer activities.
- Opportunity to exert effort and achieve success.
- Health care for medical needs.
- Decent schools and schooling.
- Access to services to treat any needs that may arise and require professional care.

This does not mean all children raised in communities where these conditions are prevalent will succeed any more than it means all children raised in communities without them will fail. But it does mean that the absence of any of these conditions puts children at greater risk. And the fewer the number of conditions, the greater the risk.

But more than the absence of negative conditions (abuse, neglect, environmental danger), positive conditions (nurturing opportunities to experience growth and receive reinforcement) are needed for children to succeed at high levels.

The list also makes common sense. People see these conditions as pathways to their own successes. They point to persons providing stability and nurturing in their lives, mentors holding them to high expectations and peer activities supporting social norms as key factors in their growth and development.

The crucial questions is: How can these elements be transformed into supports and services that are part of communities for all children?

A Movement Is Possible

A movement for children is greater than the children themselves: The whole view is more than its parts. This is obvious, but often overlooked. To construct better lives for children, better lives must be offered to parents, guardians, teachers and role models. This approach is unconditional and involves all aspects of existence: economic, moral, physical, emotional and societal. A movement, therefore, must envision all steps necessary to bring about its objective: healthier children.

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Building a coalition—even among those with the most enlightened outlooks—that will light the fires of a movement is difficult. But a movement is possible, if such action on behalf of children and families . . .

▼ focuses on universal needs

▼ respects family roles

▼ partners with a broad range of action-oriented strategies and groups

▼ is inclusive of all voices

▼ has several levels. It must support neighborhood structures and encourage connections across communities; it must build toward a national agenda from a grassroots foundation.

Grassroots Change

Details of a movement's strategy should grow out of a broadly driven, inclusive, community-based consensus. Such a process is time-consuming and sometimes frustrating, but only with common understandings and common goals can enough momentum be generated to create change on a national level.

A broadly inclusive coalition of community associations, for-profit and nonprofit development corporations, local agencies, organizations, and faith groups must unite with their national counterparts to create a unified, coherent voice for families and children.

Bedrock Principles

No coalition can succeed until it coalesces around bedrock principles that recognize the barriers and express ways to overcome them. Some examples:

▼ Where racism and/or classism divide, we must acknowledge their division and overcome it by:

• building trust by listening to each other,

• working together on projects more important than individual prejudices,

• voicing common hopes, aspirations and intentions.

▼ Where public response is apathy and indifference, we must engender responsibility to act by linking economic/human/family development; we must recognize individual duty to act while enunciating society's self-interest in the development of physically, emotionally and morally healthy children.

▼ Where poverty exists, we must realize economic development—through the opportunity to be employed in meaningful work. Rather than repeatedly giving out fishes—as goes the old parable—we must stress the need for learning to fish: our society's goals should include full employment, equity in hiring, investments in job training, and programs that teach people the skills necessary to get and hold jobs.

▼ Where our children are alienated, we need to be more inclusive. Young people should be part of the decision making process.

Building a coalition based on trust, common goals, and unified purpose could result in a movement that would

▼ engender stronger neighborhoods,

▼ foster a greater sense of community among people of differing interests, build connections across barriers of race, age and economic backgrounds,

▼ develop a broad inclusiveness among the vulnerable pockets of our society, and

▼ transform our national agenda into one that will, in fact, rebuild the mental and physical health of families and children—our ultimate goal.

A broadly inclusive coalition of community associations, for-profit and nonprofit development corporations, local agencies, organizations, and faith groups must unite with their national counterparts to create a unified, coherent voice for families and children.

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Next Steps

How do we carry forward the energy and enthusiasm generated at this Symposium to promote more positive outcomes for children and families?

A small steering committee comprised of members of the original planning committee, as well as representatives from the ad hoc caucus group, and other interested individuals are currently engaged in dialogue to answer the question: Where do we go from here? As this group wrestles with the challenges of moving a coalition forward, the following steps have already been agreed to:

- ▼ Wide distribution of these proceedings is planned. We must continue to network with the many organizations and groups dedicated to similar outcomes.
- ▼ The four papers summarized within the proceedings will be revised to reflect suggestions by the ad hoc committee. These papers will also be given wide distribution for continued dialogue on the strategies and approached presented.
- ▼ The recommendations of the ad hoc caucus group will be expanded upon for use as guidelines for program planning. These, too will receive broad distribution.
- ▼ Individuals may introduce these guidelines for consideration of all types of organizations in their planning processes to enhance diversity and promote cultural democracy.

As the steering committee continues to define and refine the vision articulated in Charles Bruner's paper, examples of implementation of the strategies put forth by John Gates, Frank Farrow and Bob Friedman are taking place in communities throughout the country. The concepts of resiliency, natural supports, and leadership teams are influencing the delivery of services and will continue to gain momentum in our changing human service systems.

- ▼ Our hope is that these proceedings serve as a useful tool for the work taking place in communities aimed toward promoting more positive outcomes for children and families.

THE CASE FOR KIDS

As the steering committee continues to define and refine Charles Bruner's vision, implementation of the strategies is taking place in communities throughout the country. Concepts of resiliency, natural supports, and leadership teams are influencing the delivery of services and

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Community Strategies for Children & Families

Promoting Positive Outcomes Symposium Attendees
The Carter Center • Atlanta, Georgia • February 14–16, 1996

THE CASE FOR KIDS

There seems to be no shortcut to a relatively slow process of team building, trust building, mutual understanding and taking the time to get together. And there's seems to be a set of skills and commitments that call for people who are not only in it for the long haul, but who really draw no boundaries in terms of what they are willing to do.
— Robert Friedman

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THE CASE FOR KIDS

System change at the neighborhood level cannot happen by itself. The impetus and resources for change must come from inside and outside the neighborhood. The most challenging task is to develop methods for neighborhood residents to have a voice in how systems are administered, and some oversight in order to hold them accountable.

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Co-sponsors of Community Strategies for
Children and Families: Promoting Positive Outcomes

The Carter Center Mental Health Program

Former First Lady Rosalynn Carter has been the driving force behind the development of The Carter Center Mental Health Task Force and Program. Mrs. Carter chairs the Task Force, whose purpose is to identify issues of major concern, convene diverse constituences, develop specific initiatives to reduce stigma and discrimination against people with mental illness, and promote mental health. Targeted priority areas include: (1) the equitable inclusion of mental health in health care reform; (2) early childhood education, prevention and health promotion programs; (3) the problem of stigma and mental illness; and (4) the furthering of treatment, services and supports for people with mental illness and for their families. **For further information:** The Carter Center Mental Health Program, One Copenhill, Atlanta, GA 30307. Phone: (404) 420-5165; Fax: (404) 420-5158.

The Center for the Study of Social Policy

The Center for the Study of Social Policy is a nonprofit organization located in Washington, D.C., which was established in 1979 to assist federal, state, and local governments in improving human services for low-income and other disadvantaged populations. The Center prepares publications in the following areas: income maintenance; social services; health care; disability; long-term care; and services to children, youth, and families. This Center seeks to promote systemic reform in human services through changes in financing, administration, and delivery of services. Its mission is to effect change through the analysis of existing policies and the development of new ones reflecting both intergovernmental and interagency perspectives. **For further information:** The Center for the Study of Social Policy, 1250 Eye Street, NW, Suite 503, Washington, DC 20005. Phone: (202) 371-1565; Fax: (202) 371-1472.

Florida Mental Health Institute

The Florida Mental Health Institute of the University of South Florida is a research and training institute dedicated to strengthening mental health services through knowledge development and dissemination. The Department of Child and Family Studies is one of four academic departments within the Florida Mental Health Institute. The Department of Child and Family Studies is a multi-disciplinary department that is engaged in system of care research and consultation projects in its local area, throughout the state of Florida, and around the country. **For further information:** Department of Child and Family Studies, 13301 Bruce B. Downs Blvd, Tampa, FL 33612. Phone: (813) 974-4640; Fax: (813) 974-4406.

Community Strategies for Children and Families: Promoting Positive Outcomes *was funded through a grant to the Department of Child and Family Studies to a Research and Training Center for Children's Mental Health from the National Institute on Disability and Rehabilitation Research, and the Center for Mental Health Services. Additional funding was provided through grants from the Annie E. Casey Foundation, and the Freddie Mac Foundation.*